

INDIANA UNIVERSITY- PURDUE UNIVERSITY INDIANAPOLIS

INVOICE

CUSTOMER NUMBER: WES6721
CUSTOMER PO NBR:
PO DT:

IN2086267CGG

INVOICE NUMBER:
01-TP4905410
INVOICE DATE:
12/16/2009

PROVIDED TO:
ATTN: A/P. JASON DOMBKOWSKI

WEST LAFAYETTE POLICE DEPT
711 W NAVAJO ST

WEST LAFAYETTE IN 47906

BILLED BY (DO NOT REMIT TO):

INDIANA UNIVERSITY
PHARMACOLOGY & TOXICOLOGY
MS A401
INDIANAPOLIS

IN 46202-5120

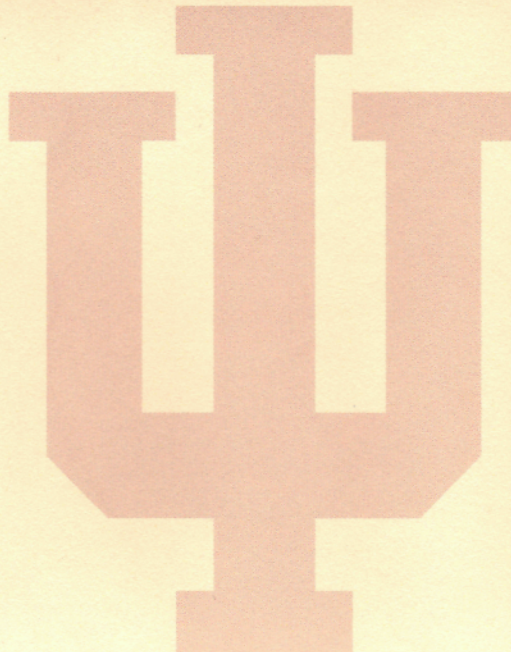
/317-274-7825

FAX 317-278-2836

INDIANA STATE DEPT. OF TOXICOLOGY 2010 BTI MAINT. PROGRAM

FEIN NUMBER 35 600 1673

QTY	UNIT	ITEM	DESCRIPTION	UNIT PRICE	EXT. PRICE
1.00	EA	IM	EVIDENTIARY BREATH TEST INST MAINT PROG	650.00	650.00
TERMS: NET 30 DAYS				PAY THIS AMOUNT	650.00



RETAIN THIS PORTION FOR YOUR RECORDS

..... RETURN THIS PORTION WITH PAYMENT

Make Checks Payable To:
INDIANA UNIVERSITY

INVOICE DATE 12/16/2009
INVOICE NUMBER 01-TP4905410
CUSTOMER NBR WES6721
DUE DATE 01/15/2010
AMOUNT DUE \$650.00
IN2086267CGG

ATTN: A/P. JASON DOMBKOWSKI

WEST LAFAYETTE POLICE DEPT
711 W NAVAJO ST

WEST LAFAYETTE

IN 47906

REMIT TO:

INDIANA UNIVERSITY
INDIANA UNIVERSITY
PO BOX 66271

INDIANAPOLIS

IN 46266-6271

UA/FMS /WES6721 01TP490541012/16/2009000000000065000

FORMS MUST BE COMPLETED BY JANUARY 31, 2010.

Or mail this form to: Indiana State Department of Toxicology
550 W. 16th Street, Suite A
Indianapolis, IN 46202

Type: BAC Datamaster Serial #: 95033

Agency Name: WEST LAFAYETTE POLICE DEPARTMENT

Street Address: 711 W. Navajo Street

City: W. Lafayette, IN Zip Code: 47906

Phone: (765) 775-5200 Fax Number: (765) 775-5228

Contact Person for Datamaster Maintenance: Capt. Mike Francis

Chief of Police, Sheriff, CEO, etc.: Chief Jason Dombkowski

Date _____